UNITED STATES PATENT & TRADEMARK OFFICE 'YVashington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | | | | | | |
|--|----------------------------|-----------------------|-----------------------------|-----------------|----------|----------|
| 1 Date of Request: 1/26/2005 2 Serial/Patent # 09/939,537 | | | | | | |
| 3 Please refund the following fee(s): | | 4 PAPE NUME | | 5 DATE FILED | 6 AMOUNT | |
| Filing | | | | - | \$ | |
| | Amendment | | | | | \$ |
| | Extension of Time | | | | | \$ |
| ~ | Notice of Appeal/Appeal | | | | | \$ |
| X | Petition | | | | 12/22/03 | \$200.00 |
| 7 | Issue | | | | 17 | \$ |
| | Cert of Correction/Termina | l Disc. | | | | \$ |
| | Maintenance | | | | | \$ |
| | Assignment | | | | | \$ |
| | Other | | | | | \$ |
| | | | 7 TOTAL AMOUNT OF REFUND | | | \$ |
| | | | 8 TO BE REFUNDED BY: | | | |
| 10 REASON: | | | | Treasury Check | | |
| X | Overpayment | Credit Deposit A/C #: | | | | |
| | Duplicate Payment | | , | , C | 3 2 | 1095 |
| | No Fee Due (Explanation): | | | | | |
| Fee required 15 \$200, not \$400. | | | | | | |
| | | | | | | |
| | | | | | | |
| 11 REFUND REQUESTED BY: | | | | | | |
| TYPED/PRINTED NAME: NANCY-JOHNSON TITLE: JV. Lettlons Atty | | | | | | |
| signature: 9 ancy of son phone: 571-272-3219 | | | | | | |
| office: <u>fetitions</u> | | | | | | |
| THIS SPACE RESERVED FOR FINANCE USE ONLY: | | | | | | |
| APPROVED: Wille DATE: 2/3/35 | | | | | | |
| | | | | | | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B